

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CO I Green
Montgomery City Jail
P. O. Drawer 159
Montgomery, AL 36195

5CW 895

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J. L. Scott*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery
OCT 3 2005

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7005 1160 0001 3017 0064

Domestic Return Receipt

15-02-M-

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4. Restricted Delivery? (Extra Fee)

☐ Yes

7005 1160 0001 3017 0057

Domestic Return Receipt

2595-02-M-154